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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/690,253 – Conf. # 3425
	Filing Date	October 20, 2003
	First Named Inventor	Li-Chih Lu
	Art Unit	3691
	Examiner Name	Alexander G. Kalinowski
	Attorney Docket Number	78438-244377

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 
☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

OR

☐ Firm or  
Individual Name

Address

City

Country

State

Zip

Telephone

Email

I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
**SIGNATURE of Applicant or Assignee of Record**

Signature	Li-Chih Lu		
Name	Li-Chih Lu		
Date	6/12/2007	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.